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TO:	Mail Stop RCE	FAX NO.:	571-273-8300
FROM:	Kenneth N. Nigon	ADMIN. ASST.:	Patricia C. Boccella
APPLN. NO.:	10/619,115	ATTY. DOCKET NO.:	MKPA-105US
TITLE OF APPLN.: INTEGRATED FIBER ATTACH PAD FOR OPTICAL PACKAGE			
FILING DATE:	7/14/03	ART UNIT:	2874
FIRST INVENTOR:	Michael Powers	CONF. NO.:	6849
TITLE OF DOCUMENT (and List of Attachments): Transmittal, RCE Transmittal (in Dup); PTO-2038; Petition For Extension of Time (in dup)			

Total Number of Pages: 7 (including this form)

COMMENTS

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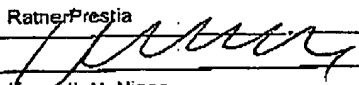
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/619,115
	Filing Date	July 14, 2003
	First Named Inventor	Michael Powers
	Art Unit	2874
	Examiner Name	Sarah U. Song
	Total Number of Pages in This Submission	6
Attorney Docket No.	MKPA-105US	

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD; Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): RCE Trans.; PTO-2038
<input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks: :		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

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